

# 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

<b>1. NAME OF COMMITTEE IN FULL</b> Families for James Lankford																																						
<b>ADDRESS</b> (number and street) PO Box 1639																																						
<b>CITY, STATE, and ZIP CODE</b> Bethany OK 73008																																						
<b>2. NAME OF CANDIDATE</b> Mr. James Paul Lankford		<b>3. OFFICE SOUGHT</b> (State and District) House OK 05																																				
<b>4. FEC IDENTIFICATION NUMBER</b> C00466482																																						
<b>5. IS THIS AN AMENDMENT?</b> <input checked="" type="checkbox"/> NO, THIS IS A NEW FILING <input type="checkbox"/> YES, IT AMENDS THE NOTICE FILED ON _____ / _____ / _____																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 45%;">A. FULL NAME, MAILING ADDRESS AND ZIP CODE</th> <th style="width: 20%;">Name of Employer</th> <th style="width: 15%;">Date (month, day, year)</th> <th style="width: 20%;">Amount</th> </tr> <tr> <td rowspan="3">           Freddie D Baker             120 Lake Aluma Dr             Oklahoma City OK 73121         </td> <td>Yukon Door &amp; Plywood Inc.</td> <td rowspan="3">10/22/2012</td> <td rowspan="3">1000</td> </tr> <tr> <td colspan="2"><b>Transaction ID : F65-CN11864</b></td> </tr> <tr> <td>Occupation</td> <td>President</td> </tr> <tr> <td rowspan="3">           B. FULL NAME, MAILING ADDRESS AND ZIP CODE            Mrs. Sheryl Kay Willingham             23000 N May Ave             Edmond OK 73025         </td> <td>Self</td> <td rowspan="3">10/22/2012</td> <td rowspan="3">1000</td> </tr> <tr> <td colspan="2"><b>Transaction ID : F65-CN11867</b></td> </tr> <tr> <td>Occupation</td> <td>Home Builder</td> </tr> <tr> <td rowspan="2">           C. FULL NAME, MAILING ADDRESS AND ZIP CODE         </td> <td>Name of Employer</td> <td rowspan="2">Date (month, day, year)</td> <td rowspan="2">Amount</td> </tr> <tr> <td>Occupation</td> </tr> <tr> <td rowspan="2">           D. FULL NAME, MAILING ADDRESS AND ZIP CODE         </td> <td>Name of Employer</td> <td rowspan="2">Date (month, day, year)</td> <td rowspan="2">Amount</td> </tr> <tr> <td>Occupation</td> </tr> <tr> <td rowspan="2">           E. FULL NAME, MAILING ADDRESS AND ZIP CODE         </td> <td>Name of Employer</td> <td rowspan="2">Date (month, day, year)</td> <td rowspan="2">Amount</td> </tr> <tr> <td>Occupation</td> </tr> </table>				A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	Freddie D Baker  120 Lake Aluma Dr  Oklahoma City OK 73121	Yukon Door & Plywood Inc.	10/22/2012	1000	<b>Transaction ID : F65-CN11864</b>		Occupation	President	B. FULL NAME, MAILING ADDRESS AND ZIP CODE Mrs. Sheryl Kay Willingham  23000 N May Ave  Edmond OK 73025	Self	10/22/2012	1000	<b>Transaction ID : F65-CN11867</b>		Occupation	Home Builder	C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	Occupation	D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	Occupation	E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount	Occupation
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount																																			
Freddie D Baker  120 Lake Aluma Dr  Oklahoma City OK 73121	Yukon Door & Plywood Inc.	10/22/2012	1000																																			
	<b>Transaction ID : F65-CN11864</b>																																					
	Occupation			President																																		
B. FULL NAME, MAILING ADDRESS AND ZIP CODE Mrs. Sheryl Kay Willingham  23000 N May Ave  Edmond OK 73025	Self	10/22/2012	1000																																			
	<b>Transaction ID : F65-CN11867</b>																																					
	Occupation			Home Builder																																		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount																																			
	Occupation																																					
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount																																			
	Occupation																																					
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount																																			
	Occupation																																					
<b>SIGNATURE (optional)</b> Mrs. Terri Lynn Miller  <div style="text-align: right;">[Electronically Filed]</div>		<b>DATE</b> 10/24/2012																																				
<b>For further information contact:</b> Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100																																						

--	--	--

Any information copied from reports and statements filed under the Federal Election Campaign Act may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes other than using the name and address of any political committee to solicit contributions from such committee.

## FEC FORM 6

(Revised 07/2011)